

Information about you	
Name:	
Phone #:	SS#:
Current mailing address:	
Have you been attending school? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently working with a program counselor in our office: <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, does this job relate to your training? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, who:
Are you working with a re-entry program? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, is your employer aware of this? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Information about your employer	
Business name:	
Type of business:	
Employer or supervisor's name:	Business phone #:
Business address:	
Information about your job	
Job title:	
Start date of work:	Wage:
How often are you paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: Hours per week:	
Benefits - check all that apply <input type="checkbox"/> Medical <input type="checkbox"/> Dental <input type="checkbox"/> Vacation <input type="checkbox"/> Sick leave	
<input type="checkbox"/> Retirement <input type="checkbox"/> Vision <input type="checkbox"/> Other:	
How did you learn about this position?	
Is this that last employer you worked for? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is this a new position? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please return this information to:	

☐ WorkSource – Vancouver
 5411 E Mill Plain Blvd Suite15
 Vancouver WA 98661
 Fax: (360) 735-5042
returntowork@esd.wa.gov

**Would you like to
 stay active in job
 search?**
Yes No

☐ WorkSource -Cowlitz/Wahkiakum
 305 S Pacific Suite A (in person)
 PO Box 29 (by mail)
 Kelso WA 98626
 Fax: (360) 577-2039

Are you willing
 to share your
 success story?
Yes No

For internal purposes only:

BSU ___ JP ___

CATS ___ E-Jas ___ Note ___

Employment Status ___

GUIDE: JSR ___ Q20/Q22 ___

CALL INS: CPP ___ EUC ___ REO ___

EXITED

WIA ___ TAA ___

OES ___ WF ___ VETS ___

Re-employment/OJM ___

COMPLETED